Findings from a Focus Group with Uninsured Hispanic Men

and comparisons with findings for other uninsured groups

by Pablo Aliaga, The Urban Institute Presented at The DC State Planning Grant Advisory **Panel Meeting January 10, 2005**





Summary of Approach

- Focus group held in December 2004 at the Neighbors' Consejo; duration 2 hours
- Questions explored insurance status, experiences with public programs, access to care, barriers, and costs
- 11 male participants almost half Salvadorian, but also Guatemalan, Mexican, Honduran, Ecuadorian and Nicaraguan; ages 21-55
- Participants have lived in the U.S. for 1-15 years



Coverage

- Respondents saw the importance of health care and wanted coverage
- Almost two-thirds of participants have never had insurance
- Several have had Alliance coverage for a short period at some time in the past



Comparing Coverage

- Men are less likely than women to have had coverage previously
- Men appear to be less concerned about having health care coverage than women

Major Barriers to Coverage

- **Documentation**
 - Requirements are too numerous and keep increasing
 - Requirements are confusing
 - Many participants cannot meet basic identification requirements (e.g., home phone #, proof of residency)
- Logistics
 - Hard to get time off from work
 - Clinic personnel are not accessible
 - **Ambiguities regarding renewals**



Comparing Major Barriers to Coverage

 Issues with documentation and logistics are similar for men and women



Costs

- Medical costs are a problem due to high cost
- Participants would be willing to pay \$100-\$200 a month, if they knew exactly what services would be covered
 - For that price, they expect insurance to cover everything (eye, dental, prescription drugs, etc.)
- Participants would be willing to pay deductibles as Alliance members

Comparing Out-of-Pocket Costs

- Both men and women are willing to pay for coverage
- In general, men report being willing to pay more per month

Access Problems

- Reported discrimination or racism
 - Perceptions of discrimination include heavy paperwork requirements, misinformation, wait times for appointments, and clinic workers who take advantage of client passivity
- Language barrier
 - Administration/staff/physicians don't speak Spanish



Comparing Access Problems

- Men and women experienced similar forms of perceived discrimination
- Both groups reported that language was a considerable barrier

Comparison with Uninsured non-Hispanic

- Both Hispanic and non-Hispanic groups lack accurate and adequate knowledge about current enrollment practices
- Hispanic groups reported being more persistent in pursuit of health care coverage

Recommendations for Improvement and the Future

- Form a union
 - Look for additional funding for health insurance;
 - Talk to insurance companies about providing for a group
- Simplify forms for enrollment into Alliance
- Improve information dissemination and provide more information on the Alliance in Spanish

